Combined Declaration For Patent Application and Power of Attorney  ATTORNEY 86238AMGE							OCKET		
As below named inventor, I hereby declare that:  My residence, post office address and citizenship are as stated below next to my name,  I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:									
PREVENTING CREASE FORMATION IN DONOR WEB IN DYE TRANSFER PRINTER THAT CAN CAUSE LINE ARTIFACT ON PRINT									
The specification of which (check only one item below):									
X is attached hereto.									
was filed as United State		erial No. on and	d						
was amended on (if applicable).  was filed as PCT international application Number on and was amended on (if applicable).									
I hereby state that I have reviewed			<del></del>			laims, a	s amended by	any am	endment
referred to above.							·		
I acknowledge the duty to disclos 37, Code of Federal Regulations,		nt & Trademark	Office all	l information known to in	e to be mater	nal to p	atentability as	defined	in Title
I hereby claim foreign priority be	nefits under Title	*	, ,		, ,	• •	•		
certificate, or (365 (a) of any PCT and have also identified below ar			_						
one country other than the United				<u> </u>				-	
priority is claimed: PRIOR FOREIGN/PCT APPLI	CATION(S) AND	ANY PRIORIT	TV CL AII	MS LINDER 35 LISC	110.		· · ·		_
			II CLAII				PRIORITY CLAIMED U		
COUNTRY (# PCT_ indicate PCT)	1	PLICATION NUMBER		DATE OF FILING (month/dayyear)			YES	NDEN 35 03C	NO
							YES		NO
			1				YES		NO
I hereby claim the benefit under T	itle 35 United Str	ites Code 119 &	(e) of any	United States provisional	application(	s) listed	l below:		
PRIOR PROVISIONAL APPLI								-	
	PLICATION NUMBER				FILING DATE (mor	nth/day/year)			
		·							
I hereby claim the benefit under Title 35, United States Code, §120 of any prior United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior applications(s) in the manner provided by the first paragraph of Title 35, §112, I acknowledge the duty to disclose to the U.S. Patent & Trademark Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations §1.56, which became available between the filing date of the prior application(s) and the national or PCT international filing date of this application:									
PRIOR US APPLICATIONS OR PCT INTERNATIONAL APPLICATIONS DESIGNATING THE U.S FOR BENEFIT UNDER 35USC§120:									
	U.S. APPLI	CATIONS			STATUS (Check one)				
U.S. APPLICATION NUM	U.S. FILING DATE			PATENTE	D	PENDING	ABA	ANDONED	
10/426,591	April 30, 2003					X			
PCT APPLICATIONS DESIGNATING THE U.S.									
PCT APPLICATION NO. PCT FILI		NG DATE U.S. SERIAL NUMBERS ASSIGNED (if any)							
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Combined Declaration For Patent Application and Power of Attorney (Continued)	ATTORNEY DOCKET 86238AMGB
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POWER OF ATTORNEY: As a named inventor, I hereby appoint the attorney(s) and/or agent(s) associated with Eastman Kodak Company <u>Customer No. 01333</u> to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

е	nd Corresp	ondence to:		Direct Telephone Calls to:
		Patent Legal S	Staff	(name and telephone number)
		Eastman Kod		
		343 State Stre	Mark G. Bocchetti	
		7 7 7 7	585-477-3395	
		Rochester, N	Y 14650-2201	FAX: 585-477-4646
2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
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0	CITIZENSHIP			
4	BUSINESS ADDRESS	BUSINESS ADDRESS	CITY	STATE & ZIP CODE (COUNTRY)
2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
5	BUSINESS ADDRESS	BUSINESS ADDRESS	CITY	STATE & ZIP CODE (COUNTRY)
2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
0	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
6	BUSINESS ADDRESS	BUSINESS ADDRESS	CITY	STATE & ZIP CODE (COUNTRY)

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

SIGNATURE OF INVENTOR 201	SIGNATURE OF INVENTOR 202	SIGNATURE OF INVENTOR 203
80 Gen	Joyn Shix	Kht V. M. V
DATE	DATE	DATE
03/18/2014	03/18/2004	3/19/64
SIGNATURE OF INVENTOR 204	SIGNATURE OF INVENTOR 205	SIGNATURE OF INVENTOR 206
DATE	DATE	DATE